

Paid date	Column	Check	Fee \$
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Date	M
Mfg	

Owner's name			Mfg'r's serial no.		Dept serial no.	
Installation address			Type of construction	Occupancy	ETA at site	
City	State	ZIP+4	County			Phone number

[illegible]

Inspector's name (print/type)		Phone: (8 am to 5 pm)		Manufacturer's name (print/type)	
Office location				Date / /	Manufacturer's signature
For Dept. Use ONLY	Rec'd / /	File	By		White - Olympia office Green - Electrical section

White - Olympia office  
Green - Electrical section  
Canary - Inspector  
Pink - Building department  
Goldenrod - Customer